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CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post

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Commissioner for Patents, PO Box 1450, Alexandria,

Jeanne Johnson

August 6, 2003

(Date of Deposit)

Virginia 22313-1450.

EV 004216930 US

(Express Mail Label Number)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Piao et al.

Title:

CONFIGURABLE RETICLE FOR LITHOGRAPHY AND A METHOD OF MAKING INTEGRATED CIRCUITS

USING SUCH A RETICLE

Appl. No.:

09/775,059

Appl. Filing Date: 02/01/2001

Examiner:

Chacko Davis, D.

Art Unit:

1756

REQUEST FOR CONTINUED EXAMINATION (RCE) **TRANSMITTAL**

Mail Stop RCE Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1.	Submission require	d under 37	C.F.R. §1.114:	(check items	that apply)

a. Pre	eviously submitted:
[X]	Please enter and consider the amendment/reply previously filed on <u>July 7, 2003</u> .
[]	Please consider the Affidavit(s)/Declaration(s) previously filed on but not considered.
	Discourse the the assuments in the Annual Priof or Panky Briof under 3

Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ____.

Other 08/08/2003 ANDNDAF1 00000112 09775059

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750.00 OP

b.	Enc	losed	are:
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] ,	٩m٥	end	me	nt/	Re	ply	/.
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- [] Affidavit(s)/Declaration(s).
- [] Information Disclosure Statement.
- [] Form PTO-1449 with copies of ___ listed reference(s).
- [] Other.

Miscellaneous:

[] Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months.

The filing fee is calculated below:

	Claims as Amended		Previously Paid For		Extra Claims Presen	s	Rate		Fee Totals
RCE Fee 1.17(e)	,						\$750.00		\$750.00
Total Claims:	20	·X	20	=	.0	— x	\$18.00	=	\$0.00
Independents:	3	X	3	=.	0	x	\$84.00	=	\$0.00
First presentation	on of any Mi	ultiple	e Dependent	Clai	ms:	+	\$280.00	=	\$0.00
· · · · · · · · · · · · · · · · · · ·		•				CLAIMS	FEE TOTAL:	=	\$750.00

	EXTENSION CLAIMS AND EXTENSION	-	\$0.00 \$750.00
	EXTENSION	N FEE TOTAL:	\$0.00
l J	Extension for response filed within the fifth month:	\$1,970.00	\$0.00
[]	Extension for response filed within the fourth month:	\$1,450.00	\$0.00
[]	Extension for response filed within the third month:	\$930.00	\$0.00
[]	Extension for response filed within the second month:	\$410.00	\$0.00
[]	Extension for response filed within the first month:	\$110.00	\$0.00

- Please charge Deposit Account No. 06-1447 in the amount of \$750.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$750.00 to cover the filing fee is enclosed.
- [${f X}$] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

FOLEY & LARDNER

Suite 3800

777 East Wisconsin Avenue

Milwaukee, Wisconsin 53202-5306

Telephone:

(414) 297-5768

Facsimile:

(414) 297-4900

Marcus W. Sprow Attorney for Applicant

Registration No. 48,580